

Fill in this information to identify the case:

Debtor name Legend Energy Services, LLC

United States Bankruptcy Court for the:

Eastern District of Texas

Case number (if known): 21-60451

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/09/2021
MM/ DD/ YYYY

X

/s/ Matthew D. Goodson

Signature of individual signing on behalf of debtor

Matthew D. Goodson

Printed name

Chief Operating Officer

Position or relationship to debtor

Fill in this information to identify the case:

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Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1 NBC Oklahoma	Checking account	2523	\$9,464.86

Additional Page Total - See continuation page for additional entries

\$55,719.59

4. Other cash equivalents (Identify all)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$65,184.45

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 Buck Lock

\$3,500.00

Add lines 7 through 8 (including amounts on any additional sheets). Copy the total to line 81. \$571,124.26

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

None

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

None

20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

None

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84.

\$0.00

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops — either planted or harvested

None

29. Farm animals *Examples: Livestock, poultry, farm-raised fish*

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

\$0.00

34. Is the debtor a member of an agricultural cooperative?

- ☒ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

None

40. Office fixtures

None

41. Office equipment, including all computer equipment and communication systems equipment and software

None

42. Collectibles *Examples: Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*

None

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

None

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

None

49. **Aircraft and accessories**

None

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

None

51. **Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

\$0.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 9: Real Property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes. Fill in the information below.

General description

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available

Nature and extent of debtor's interest in property

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest**

None

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

\$0.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No

☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

None

62. Licenses, franchises, and royalties

None

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

None

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

70. Does the debtor own any other assets that have not yet been reported on this form?

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of debtor's interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

73.1 <u>Property Package Return Premium</u>	<u>\$533.92</u>
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74. Causes of action against third parties (whether or not a lawsuit has been filed)

74.1 <u>CT Pipe Insurance Claim</u>	<u>\$112,500.00</u>
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Nature of Claim _____

Amount Requested \$112,500.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

77.1 <u>Retainer Due Back</u>	<u>\$50,000.00</u>
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Other Property Total - See continuation page for entries	<u>\$230,230.96</u>
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78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

\$393,264.88

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$65,184.45</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$571,124.26</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....</i>		→ <u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$393,264.88</u>	
91. Total. Add lines 80 through 90 for each column.....	91a. <u>\$1,029,573.59</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		<u>\$1,029,573.59</u>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Additional Page

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts - Continued

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.2 <u>NBC Oklahoma</u>	<u>Checking account</u>	<u>2481</u>	<u>\$871.40</u>
3.3 <u>First Liberty Bank</u>	<u>Checking account</u>	<u>1008</u>	<u>\$54,848.19</u>

Current value of debtor's interest

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent - Continued

Description, including name of holder of prepayment

8.2 <u>McGriff</u>	<u>\$175,840.68</u>
8.3 <u>Berkley</u>	<u>\$31,260.20</u>
8.4 <u>McGriff</u>	<u>\$47,319.68</u>
8.5 <u>Prime Rate</u>	<u>\$98,643.52</u>
8.6 <u>Prime Rate</u>	<u>\$33,876.54</u>
8.7 <u>Prime Rate</u>	<u>\$23,357.21</u>
8.8 <u>Prime Rate</u>	<u>\$4,585.00</u>
8.9 <u>ND Workforce</u>	<u>\$102,790.73</u>
8.10 <u>RimRock Properties</u>	<u>\$23,286.00</u>
8.11 <u>McGriff</u>	<u>\$500.00</u>
8.12 <u>McGriff</u>	<u>\$150.00</u>

Current value of debtor's interest

77. Other property of any kind not already listed - Continued

77.2 <u>Enterprise Vehicle Gains</u>	<u>\$230,230.96</u>
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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim
Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$0.00

Debtor Legend Energy Services, LLC Case number (if known) 21-60451

Name _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
_____	Line _____	____ _

Fill in this information to identify the case:

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United States Bankruptcy Court for the:
Eastern District of Texas

Case number (if known): 21-60451

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim

Priority amount

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account

number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)

Is the claim subject to offset?

☐ No

☐ Yes

2.2 Priority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account

number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)

Is the claim subject to offset?

☐ No

☐ Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>A & R ENTERPRISES LLC DBA SERVICE ELECTRIC AND R & E ELECTRIC</u> <u>PO BOX 2000</u> <u>KILGORE, TX 75663</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$8,496.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>A&W ENERGY LLC DBA DFW HEAVY DUTY PARTS</u> <u>1301 FORUM WAY S</u> <u>FORT WORTH, TX 76140</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,568.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>ABS OPERATING LLC DBA ADVANTAGE BUILDING SERVICES</u> <u>PO BOX 5089</u> <u>LONGVIEW, TX 75608</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,898.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>AIR COMM</u> <u>4840 S 35TH ST</u> <u>PHOENIX, AZ 85040</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$12,105.16</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>AIR PRODUCTS AND CHEMICALS, INC</u> <u>MAIL CODE: 5701</u> <u>PO BOX 71200</u> <u>CHARLOTTE, NC 28272-1200</u>	As of the petition filing date, the claim is: <u>\$21,076.28</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset?

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.6 Nonpriority creditor's name and mailing address <u>AIRGAS INC DBA AIRGAS NITROGEN SERVICES, LLC</u> <u>PO BOX 734446</u> <u>CHICAGO, IL 60673-4446</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$59,596.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.7 Nonpriority creditor's name and mailing address <u>ALPHA EQUIPMENT SERVICES LLC</u> <u>3084 ABORDEAN LN</u> <u>GRAND JUNCTION, CO 81504</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$11,600.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.8 Nonpriority creditor's name and mailing address <u>ALPHA FIRE SAFETY AND SUPPLY COMPANY LLC</u> <u>313 LYNCH DRIVE</u> <u>BULLARD, TX 75757</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,833.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.9 Nonpriority creditor's name and mailing address <u>AMERICAN WELDING & GAS, INC</u> <u>PO BOX 779009</u> <u>CHICAGO, IL 60677-9009</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$767.91</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.10 Nonpriority creditor's name and mailing address <u>AMERIPRIDE SERVICES</u> <u>PO BOX 2020</u> <u>BEMIDJI, MN 56619-2020</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$262.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.11 Nonpriority creditor's name and mailing address <u>ANDERSON & ASSOCIATES, INC</u> <u>919 FM 1959 RD</u> <u>HOUSTON, TX 77034</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.12 Nonpriority creditor's name and mailing address <u>AT&T MOBILITY</u> <u>PO BOX 6463</u> <u>CAROL STREAM, IL 60197-6463</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>(\$300.00)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.13 Nonpriority creditor's name and mailing address <u>ATCO INTERNATIONAL</u> <u>1401 BARCLAY CIRCLE SE</u> <u>MARIETTA, GA 30060-2925</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$301.24</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.14 Nonpriority creditor's name and mailing address <u>ATLAS SAND COMPANY, LLC</u> <u>PO BOX 679718</u> <u>DALLAS, TX 75267</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$54,871.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.15 Nonpriority creditor's name and mailing address <u>ATMOS ENERGY</u> <u>5420 LBJ FREEWAY</u> <u>SUITE 1800</u> <u>DALLAS, TX 75240</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$45,092.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.16 Nonpriority creditor's name and mailing address</p> <p><u>AXOS BANK</u></p> <p><u>4350 La Jolla Village Drive, Suite 140</u></p> <p><u>CA</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.17 Nonpriority creditor's name and mailing address</p> <p><u>BAR M WELDING, LLC</u></p> <p><u>PO BOX 1716</u></p> <p><u>KILGORE, TX 75663</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,219.13</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.18 Nonpriority creditor's name and mailing address</p> <p><u>BERKLEY OIL & GAS SPECIALTY SERVICES</u></p> <p><u>PO BOX 639831</u></p> <p><u>CINCINNATI, OH 45263</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$70,314.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.19 Nonpriority creditor's name and mailing address</p> <p><u>BERT KINKAID ENTERPRISES, INC DBA EAST TEXAS GLASS CO</u></p> <p><u>PO BOX 40697</u></p> <p><u>HOUSTON, TX 77040</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$2,089.71</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.20 Nonpriority creditor's name and mailing address</p> <p><u>BHD USA, INC DBA BHD TEST & MEASUREMENT 5555</u></p> <p><u>2100 W 6TH AVE</u></p> <p><u>SUITE C</u></p> <p><u>BROOMFIELD, CO 80020</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$13,900.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.21 Nonpriority creditor's name and mailing address <u>BLACK ICE INDUSTRIAL LLC</u> <u>4714 GUERNSEY RD</u> <u>ODESSA, TX 79764</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$18,997.88</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.22 Nonpriority creditor's name and mailing address <u>BLACK SHEEP HEAVY DUTY SUPPLY LLC</u> <u>3801 SOUTH COUNTY ROAD 1285</u> <u>ODESSA, TX 79765</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$44,613.94</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.23 Nonpriority creditor's name and mailing address <u>B-LINE FILTER & SUPPLY, INC</u> <u>PO BOX 4598</u> <u>ODESSA, TX 79760</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$29,339.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.24 Nonpriority creditor's name and mailing address <u>BOOT BARN INC</u> <u>15345 BARRANCA PKWY</u> <u>IRVINE, CA 92618</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,858.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.25 Nonpriority creditor's name and mailing address <u>BROCKETT & MCNEEL LLP</u> <u>PO BOX 1841</u> <u>MIDLAND, TX 79702</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$260.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.26 Nonpriority creditor's name and mailing address <u>BRUCE GUINN</u> <u>PO BOX 1382</u> <u>PAMPA, TX 79066</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,312.25</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27 Nonpriority creditor's name and mailing address <u>BURROWS R & H MACHINE LLC DBA R & H MACHINE</u> <u>PO BOX 8606</u> <u>LONGVIEW, TX 75607</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$24,703.14</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28 Nonpriority creditor's name and mailing address <u>C L ANDERSON JR MD P A DBA VALLEY DAY & NIGHT CLINIC</u> <u>3302 BOCA CHICA BLVD</u> <u>BROWNSVILLE, TX 78521</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$150.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29 Nonpriority creditor's name and mailing address <u>CANON SAFETY SERVICES, LTD DBA CANON SAFETY</u> <u>PO BOX 5504</u> <u>LONGVIEW, TX 75608-5504</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$3,475.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30 Nonpriority creditor's name and mailing address <u>CANOPY EMPLOYMENT SCREENINGS</u> <u>814 NORTH CREEK DRIVE</u> <u>SUITE B</u> <u>CONWAY, AR 72032</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$75.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.31 Nonpriority creditor's name and mailing address CAVALIER ENERGY, LLC</p> <p>13401 Railway Dr</p> <p>OK</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.32 Nonpriority creditor's name and mailing address CERTIFIED LABORATORIES</p> <p>PO BOX 971269</p> <p>DALLAS, TX 75397-1269</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$112.43</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.33 Nonpriority creditor's name and mailing address CHEMTREC</p> <p>ACCOUNTS RECEIVABLE</p> <p>PO BOX 791383</p> <p>BALTIMORE, MD 21279-1383</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,000.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.34 Nonpriority creditor's name and mailing address CITY OF ELK CITY</p> <p>PO BOX 1100</p> <p>ELK CITY, OK 73648</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>(\$188.13)</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.35 Nonpriority creditor's name and mailing address CIZION LLC DBA VULCAN INDUSTRIAL MANUFACTURING</p> <p>1990 POST OAK BLVD STE 2400</p> <p>HOUSTON, TX 77056</p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$158,313.50</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.36 Nonpriority creditor's name and mailing address <u>CLEAR RIVER AMERICA INDUSTRIES, INC</u> <u>12818 MURPHY ROAD</u> <u>STAFFORD, TX 77477</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,278.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.37 Nonpriority creditor's name and mailing address <u>COASTAL CHEMICAL CO LLC</u> <u>DEPT 2214 PO BOX 122214</u> <u>DALLAS, TX 75312</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$13,826.66</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.38 Nonpriority creditor's name and mailing address <u>COFIROUTE USA LLC DBA RMA TOLL PROCESSING</u> <u>PO BOX 734182</u> <u>DALLAS, TX 75373</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$628.44</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.39 Nonpriority creditor's name and mailing address <u>CONTINENTAL BATTERY COMPANY</u> <u>4919 WOODALL ST</u> <u>DALLAS, TX 75247</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,193.79</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.40 Nonpriority creditor's name and mailing address <u>CORPORATE HOSPITALITY SERVICES, LLC</u> <u>125 EAST JOHN CARPENTER FWY</u> <u>SUITE 525</u> <u>IRVING, TX 75062</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$8,837.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.41 Nonpriority creditor's name and mailing address <u>CORTEX BUSINESS SOLUTIONS</u> <u>PO BOX 675035</u> <u>DALLAS, TX 75267</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$99.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.42 Nonpriority creditor's name and mailing address <u>COSTA ENERGY, LLC</u> <u>8505 FREEPORT PARKWAY, SUITE 390</u> <u>IRVING, TX 75063</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.43 Nonpriority creditor's name and mailing address <u>COVIA HOLDING CORPORATION</u> <u>FAIRMOUNT SANTROL</u> <u>PO BOX 931184</u> <u>CLEVELAND, OH 44193</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$48,797.76</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.44 Nonpriority creditor's name and mailing address <u>CRENSHAW ENTERPRISES, LLC DBA TIGER INDUSTRIAL RENTALS</u> <u>PO BOX 733253</u> <u>DALLAS, TX 75373</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$2,369.85</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.45 Nonpriority creditor's name and mailing address <u>CRESTMARK EQUIPMENT FINANCE, a division of METABANK, NA</u> <u>5480 Corporate Drive, Suite 350</u> <u>MI</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.46	Nonpriority creditor's name and mailing address CROOKS STANFORD, PLLC, DBA CROOKS STANFORD & SHOOP 171 STONEBRIDGE BOULEVARD EDMOND, OK 73013 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,624.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.47	Nonpriority creditor's name and mailing address CROWN PRODUCTS, INC. DEPT 1605 PO BOX 100 BIXBY, OK 74008 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,338.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48	Nonpriority creditor's name and mailing address CUMMINS ROCKY MOUNTAIN LLC PO BOX 912138 DENVER, CO 80291-2138 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$6,106.05</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.49	Nonpriority creditor's name and mailing address CW DAVIS ENTERPRISES DBA DTAC 5130 EDGEFIELD LN MIDLOTHIAN, TX 76065 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$909.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.50	Nonpriority creditor's name and mailing address D&D INDUSTRIAL WELDING SUPPLY INC PO BOX 2245 KILGORE, TX 75663 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,134.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.51 Nonpriority creditor's name and mailing address</p> <p><u>DARKTRACE LIMITED</u></p> <p><u>MAURICE WILKES BUILDING</u></p> <p><u>ST JOHN'S INNOVATION PARK</u></p> <p><u>CAMBRIDGE, CB4 0DS,</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$22,358.45</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.52 Nonpriority creditor's name and mailing address</p> <p><u>DAVIS CHEMICAL SERVICES, LLC</u></p> <p><u>PO BOX 1369</u></p> <p><u>MARSHALL, TX 75671</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,393.66</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.53 Nonpriority creditor's name and mailing address</p> <p><u>DICKINSON TIRE, INC</u></p> <p><u>251 21ST STREET WEST</u></p> <p><u>WEST DICKINSON, ND 58601</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$979.67</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.54 Nonpriority creditor's name and mailing address</p> <p><u>DISA, INC</u></p> <p><u>DEPT 3731</u></p> <p><u>PO BOX 123731</u></p> <p><u>DALLAS, TX 75312-3731</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,819.92</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.55 Nonpriority creditor's name and mailing address</p> <p><u>DIVERSIFIED FIRE PROTECTION, INC</u></p> <p><u>5941 MIDWAY ROAD</u></p> <p><u>FT WORTH, TX 76117</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$292.28</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.56 Nonpriority creditor's name and mailing address</p> <p><u>DNOW LP</u></p> <p><u>PO BOX 200822</u></p> <p><u>DALLAS, TX 75320-0822</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,259.20</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.57 Nonpriority creditor's name and mailing address</p> <p><u>DONALD J CULAK</u></p> <p><u>614 MCDANIEL DRIVE</u></p> <p><u>MAGNOLIA, TX 77354</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$550.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.58 Nonpriority creditor's name and mailing address</p> <p><u>DOUGLAS E PERRY DBA PERRY ROOFING AND CONTRACTING</u></p> <p><u>664 EAST BROADWAY</u></p> <p><u>DICKINSON, ND 58601</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$2,450.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.59 Nonpriority creditor's name and mailing address</p> <p><u>DRAGON PRODUCTS, LLC</u></p> <p><u>PO BOX 790</u></p> <p><u>BEAUMONT, TX 77704-0790</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$9,669.98</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.60 Nonpriority creditor's name and mailing address</p> <p><u>DS WATERS OF AMERICA DBA DEEP ROCK</u></p> <p><u>PO BOX 660579</u></p> <p><u>DALLAS, TX 75266</u></p>	<p>As of the petition filing date, the claim is: <u>\$41.80</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.61 Nonpriority creditor's name and mailing address <u>E & H ENTERPRISES OF ALEXANDRIA, INC. DBA</u> <u>ELLINGSON PLUMBING, HE</u> <u>2510 S BROADWAY STREET</u> <u>ALEXANDRIA, MN 56308</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$387.05</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.62 Nonpriority creditor's name and mailing address <u>EAST TEXAS CONSOLIDATED SUPPLY, INC</u> <u>1275 W MAIN ST</u> <u>No 567</u> <u>RIPON, CA 95366</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$56,452.27</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.63 Nonpriority creditor's name and mailing address <u>EAST TEXAS MACHNIE WORKS, INC</u> <u>2808 W MARSHALL AVE</u> <u>LONGVIEW, TX 75604</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$21,825.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.64 Nonpriority creditor's name and mailing address <u>EF FASTENERS LLC</u> <u>2320 E COMMERCE ST</u> <u>TYLER, TX 74702</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$358.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.65 Nonpriority creditor's name and mailing address <u>ELEET CRYOGENICS, INC</u> <u>11132 INDUSTRIAL PARKWAY NW</u> <u>BOLIVAR, OH 44612</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$58,530.78</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.66 Nonpriority creditor's name and mailing address <u>ENERGY SERVICES LLC</u> <u>PO BOX 12750</u> <u>LONGVIEW, TX 75602</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$110.42</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.67 Nonpriority creditor's name and mailing address <u>ENERGY SYSTEMS INDUSTRIAL INC.</u> <u>2267 SIMS STREET</u> <u>DICKINSON, ND 58601-6521</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$257.09</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.68 Nonpriority creditor's name and mailing address <u>ENTERPRISE FLEET MANAGEMENT</u> <u>PO BOX 800089</u> <u>KANSAS CITY, MO 64180-0089</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$0.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.69 Nonpriority creditor's name and mailing address <u>ENVIRONMENTAL OIL RECOVERY, INC</u> <u>PO BOX 1175</u> <u>HALLSVILLE, TX 75650</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,562.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.70 Nonpriority creditor's name and mailing address <u>EPIC PERFORMANCE SOLUTIONS, LLC</u> <u>PO BOX 2205</u> <u>DICKINSON, ND 58602</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$8,179.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.71 Nonpriority creditor's name and mailing address EXTREME SHALE PERFORMANCE DBA ESP 125 THEOBOLD AVE BLDG 1 GREENSBURG, PA 15601 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$19,648.16</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72 Nonpriority creditor's name and mailing address FACTSET RESEARCH SYSTEMS INC PO BOX 414756 BOSTON, MA 02241-4756 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$14,162.50</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73 Nonpriority creditor's name and mailing address FAST TRAC TRANSPORTATION LLC, DBA BULL DAWG ENERGY SERVICES LLC 16220 AIR CENTER BLVD HOUSTON, TX 77032 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$22,991.24</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74 Nonpriority creditor's name and mailing address FASTENAL PO BOX 978 WINONA, MN 55987-0978 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$9,029.79</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75 Nonpriority creditor's name and mailing address FLEETPRIDE PO BOX 847118 DALLAS, TX 75284-7118 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$109,821.44</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.76 Nonpriority creditor's name and mailing address</p> <p><u>FMC TECHNOLOGIES</u></p> <p><u>BANK OF AMERICA</u></p> <p><u>BOX 845346</u></p> <p><u>DALLAS, TX 75284</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$293,444.23</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.77 Nonpriority creditor's name and mailing address</p> <p><u>FOCUS MANAGEMENT GROUP</u></p> <p><u>30725 US HWY 19N PMB 330</u></p> <p><u>PALM HARBOR, FL 34684</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$22,605.65</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.78 Nonpriority creditor's name and mailing address</p> <p><u>FORT WORTH PUMP, LLC DBA FRAC PUMP PARTS</u></p> <p><u>PO BOX 381413</u></p> <p><u>DALLAS, TX 75138</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$16,522.10</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.79 Nonpriority creditor's name and mailing address</p> <p><u>FORUM US, INC</u></p> <p><u>PO BOX 203325</u></p> <p><u>DALLAS, TX 75320-3325</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$275,664.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>3.80 Nonpriority creditor's name and mailing address</p> <p><u>FRONTIER HEAVY HAUL & SUPPORT INC.</u></p> <p><u>120 COUNTY ROAD 940</u></p> <p><u>FAIRFIELD, TX 75840</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$23,000.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.81 Nonpriority creditor's name and mailing address <u>GARDNER DENVER, INC</u> <u>PO BOX 955953</u> <u>ST LOUIS, MO 63195-5953</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$170,690.78</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.82 Nonpriority creditor's name and mailing address <u>GDL INDUSTRIAL ELECTRONICS</u> <u>1301 COTTON FLAT ROAD</u> <u>MIDLAND, TX 79701</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$214.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.83 Nonpriority creditor's name and mailing address <u>GK TECHSTAR, LLC</u> <u>802 WEST 13TH ST</u> <u>DEER PARK, TX 77536</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,061.71</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.84 Nonpriority creditor's name and mailing address <u>GLOBAL TUBING, LLC</u> <u>PO BOX 204538</u> <u>DALLAS, TX 75320-4538</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,607.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.85 Nonpriority creditor's name and mailing address <u>GRAINGER</u> <u>DEPT 881179220</u> <u>P.O. BOX 419267</u> <u>KANSAS CITY, MO 64141-6267</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$191.89</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.86 Nonpriority creditor's name and mailing address <u>GUS FABRICATION, INC.</u></p> <p><u>2304 MAIN STREET</u></p> <p><u>A</u></p> <p><u>JEANERETTE, LA 70544</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$205.23</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.87 Nonpriority creditor's name and mailing address <u>H&E EQUIPMENT SERVICES, INC</u></p> <p><u>PO BOX 849850</u></p> <p><u>DALLAS, TX 75284-9850</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>(\$95.69)</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.88 Nonpriority creditor's name and mailing address <u>HAIRPIN TRUCKING LLC</u></p> <p><u>3RD COAST COMMERCIAL CAPITAL, INC</u></p> <p><u>FBO: HAIRPIN TURUCKING LLC</u></p> <p><u>HUMBLE, TX 77347-4910</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,440,678.91</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.89 Nonpriority creditor's name and mailing address <u>HARVEY'S SERVICING, INC</u></p> <p><u>PO BOX 2106</u></p> <p><u>ANDREWS, TX 79714</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$692.76</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.90 Nonpriority creditor's name and mailing address <u>HD HYDRAULICS, LLC</u></p> <p><u>PO BOX 3455</u></p> <p><u>KILGORE, TX 75663</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$27,997.38</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

<p>3.91 Nonpriority creditor's name and mailing address <u>HEILBURNS INC OF COLORADO DBA NAPA AUTO PARTS</u> <u>316 SOUTH LINK LANE</u> <u>FORT COLLINS, CO 80524</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$197.47</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.92 Nonpriority creditor's name and mailing address <u>HENNEMAN RAU KIRKIN SMITH LLP</u> <u>815 WALKER STREET</u> <u>SUITE 1440</u> <u>HOUSTON, TX 77002</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.93 Nonpriority creditor's name and mailing address <u>HEXION, INC.</u> <u>12850 COLLECTION CENTER DR</u> <u>CHICAGO, IL 60693</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$7.98</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.94 Nonpriority creditor's name and mailing address <u>H-FORCE, LLC</u> <u>PO BOX 370</u> <u>MT ENTERPRISE, TX 75681</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$338,605.68</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.95 Nonpriority creditor's name and mailing address <u>HOLT CAT</u> <u>PO BOX 650345</u> <u>DALLAS, TX 75265-0345</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$2,977.41</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.96	Nonpriority creditor's name and mailing address <u>HORIZON CABLE SERVICE, INC</u> <u>PO BOX 270895</u> <u>OKLAHOMA CITY, OK 73137</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,437.39</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.97	Nonpriority creditor's name and mailing address <u>HYDRA RIG - TEXAS</u> <u>PO BOX 201161</u> <u>DALLAS, TX 75320-1161</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>(\$1,262.93)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address <u>HYDRADYNE, LLC</u> <u>PO BOX 974799</u> <u>DALLAS, TX 75397-4799</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,500.15</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address <u>HYDRAQUIP DISTRIBUTION, INC</u> <u>PO BOX 4493</u> <u>HOUSTON, TX 77210</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>(\$2,550.37)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	Nonpriority creditor's name and mailing address <u>INDUSTRIAL ELECTRONIC SUPPLY, INC</u> <u>PO BOX 3902</u> <u>SHREVEPORT, LA 71133-3902</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>\$2,768.87</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.101	<p>Nonpriority creditor's name and mailing address <u>INDUSTRIAL OILS UNLIMITED, LLC</u></p> <p><u>PO BOX 100</u></p> <p><u>DEPT NO 1620</u></p> <p><u>BIXBY, OK 74008</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$83,887.57</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.102	<p>Nonpriority creditor's name and mailing address <u>IO ASSETS GROUP, LLC</u></p> <p><u>19415 SPORTSMAN ROAD</u></p> <p><u>EDMOND, OK 73012</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,920.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.103	<p>Nonpriority creditor's name and mailing address <u>IRON HAWK OILFIELD SERVICES</u></p> <p><u>353 CULLEN LANE</u></p> <p><u>LONGVIEW, TX 75604</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$182,066.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.104	<p>Nonpriority creditor's name and mailing address <u>JASON RAY LITTLEJOHN DBA TRIPLE L FAB WORKS</u></p> <p><u>PO BOX 836247</u></p> <p><u>RICHARDSON, TX 75083-6247</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$44,619.16</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.105	<p>Nonpriority creditor's name and mailing address <u>JIM AND ANN LEACH DBA ANDREWS PEST CONTROL</u></p> <p><u>1007 NW 10TH</u></p> <p><u>ANDREWS, TX 79714</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$746.87</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.106	Nonpriority creditor's name and mailing address <u>JOHN K ISAACS DBA, ISAACS WRECKER SERVICE</u> <u>13452 FM 206</u> <u>TYLER, TX 75709</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address <u>JOHN PAUL JOYNER JR</u> <u>9257 CR137N</u> <u>OVERTON, TX 75684</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,237.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address <u>JOSHUA EUGENE CHASE DBA CHASE WELDING SERVICES</u> <u>PO BOX 1631</u> <u>LAREDO, TX 78043</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$24,063.16</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address <u>K&C HOSE AND SUPPLY, LLC</u> <u>PO BOX 5513</u> <u>LONGVIEW, TX 75608</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$33,769.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	Nonpriority creditor's name and mailing address <u>KD TIMMONS INC</u> <u>PO BOX 2609</u> <u>BRYAN, TX 77805</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$41,592.03</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.111	<p>Nonpriority creditor's name and mailing address <u>KEITH A MILLER DBA MILLER MACHINE & WELDING</u></p> <p><u>1245 MAIN SOUTH</u></p> <p><u>DICKINSON, ND 58601</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$25.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.112	<p>Nonpriority creditor's name and mailing address <u>KELLY AUTOMOTIVE SUPPLY, INC</u></p> <p><u>PO BOX 1463</u></p> <p><u>BOWIE, OK 76230</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$811.80</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.113	<p>Nonpriority creditor's name and mailing address <u>KEMPER VALVE & FITTINGS CORP</u></p> <p><u>29423 NETWORK PLACE</u></p> <p><u>CHICAGO, IL 60673-1294</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$134,342.67</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.114	<p>Nonpriority creditor's name and mailing address <u>KILGORE HOSE SPECIALTY WAREHOUSE LLC</u></p> <p><u>3103 HIGHWAY 135 NORTH</u></p> <p><u>KILGORE, TX 75662</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$20,004.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.115	<p>Nonpriority creditor's name and mailing address <u>KILGORE TIRE CENTER INC.</u></p> <p><u>PO BOX 1202</u></p> <p><u>KILGORE, TX 75663</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$160.74</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.116	Nonpriority creditor's name and mailing address <u>KLX ENERGY HOLDINGS LLC DBA VISION OIL TOOLS</u> <u>28099 NETWORK PL</u> <u>CHICAGO, IL 60673-1280</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$442,453.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address <u>L & C SAFETY, INC. DBA STANDARD SAFETY & SUPPLY</u> <u>PO BOX 14987</u> <u>ODESSA, TX 79768</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$154,054.84</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118	Nonpriority creditor's name and mailing address <u>LEGACY CRYOGENIC TRANSPORTATION LLC</u> <u>16938 CR 3784</u> <u>COALGATE, OK 74538</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,309.04</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address <u>LES CAPITAL, LLC</u> <u>171 Stonebridge Blvd</u> <u>Edmond, OK 73013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address <u>LIFE LINE TECHNOLOGIES DBA XSTREMEND</u> <u>LIFE LINE TECHNOLOGIE,LLC</u> <u>1028 FORUM DR</u> <u>BROUSSARD, LA 70518</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$402.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.121	Nonpriority creditor's name and mailing address LOMC 3202 N FOURTH ST SUITE 100 LONGVIEW, TX 75605 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,225.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address LONESTAR FREIGHTLINER GROUP,LLC DBA LONESTAR TRUCK GROUP-WACO PO BOX 2208 DECATUR, AL 35609-2201 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$6,603.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address LONGVIEW TRUCK PARTS INC DBA LONGVIEW GEAR & AXLE INC 801 W COTTON LONGVIEW, TX 75604 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,460.21</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address LOUISIANA DEPARTMENT OF REVENUE PO BOX 3138 BATON ROUGE, LA 70821-3138 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$3,618.53</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.125	Nonpriority creditor's name and mailing address MAGNETO & DIESEL INJECTOR SERVICE DBA M&D DISTRIBUTORS 7902 FM 1960 BYPASS ROAD WEST HUMBLE, TX 77338	As of the petition filing date, the claim is: <u>\$14,884.38</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.126	Nonpriority creditor's name and mailing address <u>MALONE'S CLEANING SERVICE INC</u> <u>PO BOX 5621</u> <u>LONGVIEW, TX 75608-5621</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,113.51</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.127	Nonpriority creditor's name and mailing address <u>MARGARET DREILING</u> <u>11605 MERIDIAN MKT VIEW</u> <u>FALCON, CO 80831</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,649.23</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128	Nonpriority creditor's name and mailing address <u>MASTER ALIGNER</u> <u>PO DRAWER 7729</u> <u>LONGVIEW, TX 75607</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,388.19</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129	Nonpriority creditor's name and mailing address <u>MATEX ACQUISITION CORPORATION DBA MATEX WIRE ROPE CO, MATEX, WRC</u> <u>1121 N LONGVIEW ST</u> <u>KILGORE, TX 75662</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$418.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.130	Nonpriority creditor's name and mailing address <u>MATHESON TRI-GAS INC</u> <u>DEPT 3028</u> <u>PO BOX 123028</u> <u>DALLAS, TX 75312</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$34,573.57</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.131	Nonpriority creditor's name and mailing address <u>MAVEN VALVE & SUPPLY LLC</u> <u>1025 GARDINER MITCHELL PARKWAY</u> <u>LONGVIEW, TX 75603</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$41,806.37</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address <u>MCAFEE & TAFT</u> <u>10TH FLOOR, TWO LEADERSHIP SQUARE</u> <u>211 NORTH ROBINSON</u> <u>OKLAHOMA CITY, OK 73102-7103</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,827.12</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address <u>MCGRIFF SIEBELS & WILLIAMS</u> <u>DRAWER 456</u> <u>PO BOX 11407</u> <u>BIRMINGHAM, AL 35246-0001</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$650.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address <u>MCMaster -CARR SUPPLY COMPANY</u> <u>PO BOX 7690</u> <u>CHICAGO, IL 60680-7690</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$823.61</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address <u>Mercedes-Benz Financial Services USA LLC d/b/a Daimler Truck Financial</u> <u>14372 Heritage Parkway</u> <u>TX</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.136	<p>Nonpriority creditor's name and mailing address <u>MERCER VALVE CO, INC</u> <u>PO BOX 270970</u> <u>OKLAHOMA CITY, OK 73137</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$53.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.137	<p>Nonpriority creditor's name and mailing address <u>METRO CENTRE</u> <u>679 CR 404</u> <u>GAINESVILLE, TX 76240</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>(\$5.40)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.138	<p>Nonpriority creditor's name and mailing address <u>MID SOUTH ENGINE & POWER SYSTEMS, LLC DBA MID SOUTH ENGINE & MAC</u> <u>2201 E US HWY 80</u> <u>WHITE OAK, TX 75693</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,996.22</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.139	<p>Nonpriority creditor's name and mailing address <u>MIDWEST HOSE & SPECIALTY, INC</u> <u>PO BOX 96558</u> <u>OKLAHOMA CITY, OK 73143</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$27.88</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.140	<p>Nonpriority creditor's name and mailing address <u>MKBCCSLs OPERATIONS, LLC DBA WASHINGTON IRON WORKS</u> <u>400 EAST LAMAR STREET</u> <u>SHERMAN, TX 75090</u></p>	<p>As of the petition filing date, the claim is: <u>\$37,075.63</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.141	<p>Nonpriority creditor's name and mailing address <u>MOBILE DATA TECHNOLOGIES</u></p> <p><u>101,14535-118 AVENUE NW</u></p> <p><u>EDMONTON, T5L 2M7</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,441.98</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.142	<p>Nonpriority creditor's name and mailing address <u>MOMENTUM TRANSPORTATION DBA TURNKEY INDUSTRIES LLC</u></p> <p><u>29710 FM 2978 RD</u></p> <p><u>MAGNOLIA, TX 77354</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$281.45</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.143	<p>Nonpriority creditor's name and mailing address <u>MORLICK HAULING</u></p> <p><u>5150 57TH ST SE</u></p> <p><u>BISMARCK, ND 58504</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$13,566.18</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.144	<p>Nonpriority creditor's name and mailing address <u>MOTION INDUSTRIES</u></p> <p><u>PO BOX 849737</u></p> <p><u>DALLAS, TX 75284</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$7,306.69</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.145	<p>Nonpriority creditor's name and mailing address <u>MOUNTAIN SUPPLY & SERVICE, LLC</u></p> <p><u>PO BOX 3111</u></p> <p><u>LONGVIEW, TX 75606</u></p>	<p>As of the petition filing date, the claim is: <u>\$36.57</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.146	<p>Nonpriority creditor's name and mailing address</p> <p><u>NBC OKLAHOMA</u></p> <p><u>13401 N. Pennsylvania</u></p> <p><u>Oklahoma City, OK 73102</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.147	<p>Nonpriority creditor's name and mailing address</p> <p><u>NELSON PROPANE GAS INC</u></p> <p><u>PO BOX 1479</u></p> <p><u>FAIRFIELD, TX 75840</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$75.78</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.148	<p>Nonpriority creditor's name and mailing address</p> <p><u>NEXSEER CAPITAL</u></p> <p><u>2942 Century Place, Suite 800</u></p> <p><u>CA</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.149	<p>Nonpriority creditor's name and mailing address</p> <p><u>NORMAN J ELIAS CONSULTING</u></p> <p><u>32 STURBRIDGE LANE</u></p> <p><u>TRUMBULL, CT 6611</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$14,067.50</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.150	<p>Nonpriority creditor's name and mailing address</p> <p><u>NORTH TEXAS TOLLWAY AUTHORITY</u></p> <p><u>PO BOX 660244</u></p> <p><u>DALLAS, TX 75266-0244</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$90.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.151	<p>Nonpriority creditor's name and mailing address <u>NORTHWEST PARKWAY LLC</u> <u>3701 NORTHWEST PARKWAY</u> <u>BROOMFIELD, CO 80023</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$21.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.152	<p>Nonpriority creditor's name and mailing address <u>OCCUPATIONAL HEALTH-TEXAS</u> <u>PO BOX 9005</u> <u>ADDISON, TX 75001-9005</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$360.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.153	<p>Nonpriority creditor's name and mailing address <u>OGLETREE, DEAKINS, NASH, SMOAK & STEWART PC</u> <u>PO BOX 89</u> <u>COLUMBIA, SC 29202</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$39,920.89</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.154	<p>Nonpriority creditor's name and mailing address <u>OKLAHOMA CORPORATION COMMISSION</u> <u>PO BOX 52000</u> <u>OKLAHOMA CITY, OK 73152-2000</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$224,430.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.155	<p>Nonpriority creditor's name and mailing address <u>OKLAHOMA SAFETY MANAGEMENT COUNCIL</u> <u>3909 N LINDSAY AVENUE</u> <u>OKLAHOMA CITY, OK 73105</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.156	Nonpriority creditor's name and mailing address <u>OMT FLOW, LLC</u> <u>PO BOX 1577</u> <u>GAINESVILLE, TX 76241</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$388,849.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.157	Nonpriority creditor's name and mailing address <u>ORIGIN ROSE LLC</u> <u>PO BOX 1948</u> <u>BOULDER, CO 80306</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$624,506.63</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.158	Nonpriority creditor's name and mailing address <u>P&W SALES, INC</u> <u>405 N. HWY 135</u> <u>KILGORE, TX 75662</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$41,891.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.159	Nonpriority creditor's name and mailing address <u>PARAGON BUILDING ASSOCIATES</u> <u>5801 N BROADWAY EXT, SUITE 210</u> <u>OKLAHOMA CITY, OK 73118</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,438.17</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.160	Nonpriority creditor's name and mailing address <u>PEI - GENESIS, INC.</u> <u>PO BOX 5591</u> <u>CAROL STREAM, IL 60197</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,038.65</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.161	<p>Nonpriority creditor's name and mailing address <u>PENNSYLVANIA TURNPIKE COMMISSION</u> <u>PA TURNPIKE TOLL BY PLATE</u> <u>PO BOX 645631</u> <u>PITTSBURGH, PA 15264-5254</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$8.10</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.162	<p>Nonpriority creditor's name and mailing address <u>PERFORMANCE TRUCK/INTERSTATE BILLING</u> <u>INTERSTATE BILLING SERVICE</u> <u>PO BOX 2208</u> <u>DECATUR, AL 35609-0000</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$640.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.163	<p>Nonpriority creditor's name and mailing address <u>PETROLEUM CLUB OF OKLAHOMA CITY</u> <u>100 N BROADWAY</u> <u>SUITE 3400</u> <u>OKLAHOMA CITY, OK 73102</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$244.38</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.164	<p>Nonpriority creditor's name and mailing address <u>PIPER OILFIELD PRODUCTS</u> <u>PO BOX 94520</u> <u>OKLAHOMA CITY, OK 73143</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$849.19</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.165	<p>Nonpriority creditor's name and mailing address <u>PISCES INC</u> <u>PO BOX 2728</u> <u>KILGORE, TX 75663</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$479.54</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.166	<p>Nonpriority creditor's name and mailing address <u>POSTER GUARD</u> <u>PO BOX 669390</u> <u>POMPANO BEACH, FL 33066</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$434.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.167	<p>Nonpriority creditor's name and mailing address <u>PRAIRIE AUTO PARTS, INC</u> <u>PO BOX 1263</u> <u>DICKINSON, ND 58602</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$759.98</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.168	<p>Nonpriority creditor's name and mailing address <u>PRISCILLA KEMP DBA J&J TRANSPORTATION</u> <u>PO BOX 1287</u> <u>CALDWELL, TX 77836</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$41,075.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.169	<p>Nonpriority creditor's name and mailing address <u>PRO-ACTION FLUIDS, LLC</u> <u>PO BOX 6687</u> <u>SHREVEPORT, LA 71136-6687</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$8,861.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.170	<p>Nonpriority creditor's name and mailing address <u>PROLIFT RIGGING COMPANY, LLC</u> <u>DEPT# 3017 PO BOX 1000</u> <u>MEMPHIS, TN 38148</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,297.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.171	<p>Nonpriority creditor's name and mailing address <u>PUMPING SERVICES, INC</u></p> <p><u>PO BOX 1991</u></p> <p><u>PALESTINE, TX 75802</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$995.94</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.172	<p>Nonpriority creditor's name and mailing address <u>RAY R BRAXTON DBA BRAXTON SERVICES, INC</u></p> <p><u>1118 HAYCEE DRIVE</u></p> <p><u>LONGVIEW, TX 75606</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$719.28</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.173	<p>Nonpriority creditor's name and mailing address <u>REAGENT CHEMICAL & RESEARCH, INC</u></p> <p><u>LB 1543</u></p> <p><u>PO BOX 95000</u></p> <p><u>PHILADELPHIA, PA 19195-001</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$164,914.92</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.174	<p>Nonpriority creditor's name and mailing address <u>RENEGADE INTERNATIONAL LLC</u></p> <p><u>PO BOX 926113</u></p> <p><u>HOUSTON, TX 77292</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$10,748.30</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.175	<p>Nonpriority creditor's name and mailing address <u>RIG RUNNER, INC</u></p> <p><u>PO BOX 206546</u></p> <p><u>DALLAS, TX 75320-6546</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$6,000.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.176	Nonpriority creditor's name and mailing address <u>RIMROCK PROPERTIES, LLC</u> <u>3682 RIDGE DR</u> <u>GRAND JUNCTION, CO 81506</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$251,455.47</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.177	Nonpriority creditor's name and mailing address <u>ROLLIGON - A DIVISION OF NATIONAL OILWELL VARCO LP</u> <u>PO BOX 202154</u> <u>DALLAS, TX 75320-2154</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,743.98</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.178	Nonpriority creditor's name and mailing address <u>ROUGHNECK RADIATOR LLC</u> <u>1716 TOLEDO CIRCLE</u> <u>LONGVIEW, TX 75604</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$14,781.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.179	Nonpriority creditor's name and mailing address <u>RUSH ENTERPRISES/INTERSTATE BILLING</u> <u>INTERSTATE BILLING SERVICE, INC</u> <u>PO BOX 2208</u> <u>DECATUR, AL 35609-2208</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$54,354.54</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.180	Nonpriority creditor's name and mailing address <u>SAFETY KLEEN SYSTEM, INC</u> <u>PO BOX 650509</u> <u>DALLAS, TX 75265-0509</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>\$145.78</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.181	<p>Nonpriority creditor's name and mailing address <u>SAMBA HOLDINGS, INC</u> <u>DEPT LA 24536</u> <u>PASADENA, CA 91185</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,146.21</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.182	<p>Nonpriority creditor's name and mailing address <u>SAMSARA NETWORKS, INC DBA SAMSARA</u> <u>444 DE HARO STREET</u> <u>SAN FRANCISCO, CA 94107</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$24,785.90</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.183	<p>Nonpriority creditor's name and mailing address <u>SHALE FLOW SPECIALTIES, LLC</u> <u>300 MARVIN A SMITH DR</u> <u>KILGORE, TX 75662</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$7,236.05</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.184	<p>Nonpriority creditor's name and mailing address <u>SHRIEVE CHEMICAL PRODUCTS, INC</u> <u>1442 LAKE FRONT CIRCLE</u> <u>SUITE 500</u> <u>THE WOODLANDS, TX 77380</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$17,275.62</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.185	<p>Nonpriority creditor's name and mailing address <u>SIERRA FRAC SAND, LLC</u> <u>1155 E JOHNSON</u> <u>TATUM, TX 75691</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,637.30</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.186	<p>Nonpriority creditor's name and mailing address <u>SIGNAL PEAK SILICA LLC</u> <u>PO BOX 841716</u> <u>DALLAS, TX 75284</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$556.46</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.187	<p>Nonpriority creditor's name and mailing address <u>SINGLE LINE TECHNOLOGIES</u> <u>7211 GESSNER RD</u> <u>HOUSTON, TX 77040</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$114,101.21</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.188	<p>Nonpriority creditor's name and mailing address <u>SINGLE MEMBER DISREGRAD ENTITY DBA BIGB CRANE, LLC</u> <u>PO BOX 1061</u> <u>BURLESON, TX 76097</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.189	<p>Nonpriority creditor's name and mailing address <u>SOLARIS OILFIELD SITE SERVICES OPERATING, LLC</u> <u>PO BOX 208274</u> <u>DALLAS, TX 75320-8274</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$320,188.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.190	<p>Nonpriority creditor's name and mailing address <u>SORRELLS OIL TOOL RENTAL, LLC</u> <u>PO BOX 470</u> <u>KILGORE, TX 75663</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,892.37</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.191	<p>Nonpriority creditor's name and mailing address <u>SOUTHERN SUPPLY HOUSE LLC</u> <u>PO BOX 549</u> <u>KILGORE, TX 75663</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$8,077.91</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.192	<p>Nonpriority creditor's name and mailing address <u>SOUTHERN TIRE MART, LLC</u> <u>DEPT 143</u> <u>PO BOX 1000</u> <u>MEMPHIS, TN 38148-0143</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$31,821.55</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.193	<p>Nonpriority creditor's name and mailing address <u>SOUTHWEST BUSINESS MACHINES, INC</u> <u>564 23RD AVE EAST</u> <u>DICKINSON, ND 58601</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$75.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.194	<p>Nonpriority creditor's name and mailing address <u>SPM FLOW CONTROL, INC</u> <u>PO BOX 99395</u> <u>FT WORTH, TX 76199-3095</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,416.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.195	<p>Nonpriority creditor's name and mailing address <u>ST9 GAS AND OIL LLC</u> <u>7 SWITCHBUD PL</u> <u>SUITE 192 No 217</u> <u>THE WOODLANDS, TX 77380</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$752,584.23</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.196	<p>Nonpriority creditor's name and mailing address <u>STACIE G.MALONE DBA PRESERVATION HILL CONDOS</u></p> <p><u>PO BOX 6</u></p> <p><u>CARTHAGE, TX 75633</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$7,360.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.197	<p>Nonpriority creditor's name and mailing address <u>STARK COUNTY AUDITOR</u></p> <p><u>PO BOX 130</u></p> <p><u>DICKINSON, ND 58602-0130</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$63,115.34</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.198	<p>Nonpriority creditor's name and mailing address <u>STS OPERATING INC., DBA SUNSOURCE</u></p> <p><u>PO BOX 74007453</u></p> <p><u>CHICAGO, IL 60674</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,932.46</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.199	<p>Nonpriority creditor's name and mailing address <u>STUART HOSE AND PIPE</u></p> <p><u>701 RIVERSIDE DRIVE</u></p> <p><u>FT WORTH, TX 76111</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$19,264.23</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.200	<p>Nonpriority creditor's name and mailing address <u>SUMMERS CHIROPRACTIC PROFESSIONAL ASSOCIATION DBA SUMMERS CHIRO</u></p> <p><u>709 HOSPITAL DRIVE</u></p> <p><u>ANDREWS, TX 79714</u></p>	<p>As of the petition filing date, the claim is: <u>\$100.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.201	<p>Nonpriority creditor's name and mailing address <u>SUN COAST RESOURCES, INC</u></p> <p><u>PO BOX 202603</u></p> <p><u>DALLAS, TX 75320</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$58,718.63</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.202	<p>Nonpriority creditor's name and mailing address <u>SUNBELT RENTALS, INC.</u></p> <p><u>PO BOX 409211</u></p> <p><u>ATLANTA, GA 30384-9211</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$17,083.40</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.203	<p>Nonpriority creditor's name and mailing address <u>TARGET LOGISTICS MANAGEMENT LLC</u></p> <p><u>2170 BUCKTHORNE PALCE</u></p> <p><u>SUITE 440</u></p> <p><u>THE WOODLANDS, TX 77380</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$364,575.22</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.204	<p>Nonpriority creditor's name and mailing address <u>TARQUIN ACID LLC DBA TARQUIN COOLPRO LLC</u></p> <p><u>500 TROON DR</u></p> <p><u>ODESSA, TX 79761</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$12,164.29</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.205	<p>Nonpriority creditor's name and mailing address <u>TEAM HOUSING SOLUTIONS</u></p> <p><u>PO BOX 310697</u></p> <p><u>NEW BRAUNFELS, TX 78131</u></p> <p>Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$436,108.64</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.206	Nonpriority creditor's name and mailing address <u>TERRACON CONSULTANTS, INC</u> <u>PO BOX 959673</u> <u>ST. LOUIS, MO 63195-9673</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,730.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address <u>TEXAS AIR HYDRAULIC SERVICE & SUPPLY, INC</u> <u>PO BOX 2785</u> <u>LONGVIEW, TX 75606</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$12,913.25</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.208	Nonpriority creditor's name and mailing address <u>TEXAS COMPTROLLER OF PUBLIC ACCTS</u> <u>PO BOX 149348</u> <u>AUSTIN, TX 78114-9438</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$102,673.10</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.209	Nonpriority creditor's name and mailing address <u>TEXAS FUELING SERVICES, INC</u> <u>PO BOX 207466</u> <u>DALLAS, TX 75320</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$19,822.41</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210	Nonpriority creditor's name and mailing address <u>TEXAS OIL TOOLS</u> <u>PO BOX 201962</u> <u>DALLAS, TX 75320-1962</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>(\$1,019.40)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.211	<p>Nonpriority creditor's name and mailing address <u>TEXAS SOUTHWEST CRYOGENICS INC</u> <u>PO BOX 2220</u> <u>TOMBALL, TX 77377</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,498.18</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.212	<p>Nonpriority creditor's name and mailing address <u>THE E3 COMPANY, LLC DBA TE3CO</u> <u>301 MARVIN A SMITH RD</u> <u>KILGORE, TX 75662</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$93,034.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.213	<p>Nonpriority creditor's name and mailing address <u>THE GOODYEAR TIRE & RUBBER COMPANY</u> <u>3725 EAST LOOP DR</u> <u>LONGVIEW, TX 75602</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,027.11</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.214	<p>Nonpriority creditor's name and mailing address <u>THERMO PROCESS INSTRUMENTS, LP</u> <u>PO BOX 742770</u> <u>ATLANTA, GA 30374-2770</u> Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.215	<p>Nonpriority creditor's name and mailing address <u>TKJ, INC. DBA LONE STAR RENTAL</u> <u>830 E BROADWAY</u> <u>ANDREWS, TX 79714</u> Date or dates debt was incurred _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,367.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.216	Nonpriority creditor's name and mailing address <u>TOP LINE RENTAL LLC</u> <u>PO BOX 2290</u> <u>HENDERSON, TX 75653</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$27,466.26</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	Nonpriority creditor's name and mailing address <u>TRAVIS THOMPSON DBA T4 CONSTRUCTION SERVICES LLC</u> <u>107 COUNTY ROAD 404</u> <u>BUFFALO, TX 75831</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>(\$1,150.00)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218	Nonpriority creditor's name and mailing address <u>UM AUTO PARTS</u> <u>2714 W WALLS ST</u> <u>MIDLAND, TX 79701</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$848.11</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219	Nonpriority creditor's name and mailing address <u>UNITED ENGINES, LLC</u> <u>PO BOX 731594</u> <u>DALLAS, TX 75373-1594</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$570.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220	Nonpriority creditor's name and mailing address <u>UTEX INDUSTRIES, INC</u> <u>DEPT 878 PO BOX 4346</u> <u>HOUSTON, TX 77210</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$147,998.21</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451

Part 2: Additional Page

3.221	Nonpriority creditor's name and mailing address <u>UTILITY 1 SOURCE, LP. CTE LLC</u> <u>UOS CTE</u> <u>PO BOX 775539</u> <u>CHICAGO, IL 60677-5539</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$847.32</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.222	Nonpriority creditor's name and mailing address <u>VALTEK INDUSTRIES, INC.</u> <u>PO BOX 70239</u> <u>ODESSA, TX 79769</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$13,284.86</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.223	Nonpriority creditor's name and mailing address <u>VINMAR CAPITAL HOLDINGS LP DBA FRAC-CHEM LLC</u> <u>LOCK BOX 207643</u> <u>PO BOX 207643</u> <u>DALLAS, TX 75320</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$140,292.39</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.224	Nonpriority creditor's name and mailing address <u>WALLWORK TRUCK CENTER</u> <u>BOX 1819</u> <u>FARGO, ND 58107</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$220.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225	Nonpriority creditor's name and mailing address <u>WARREN POWER & MACHINERY, INC.DBA WARREN CAT /CAT FINANCIAL</u> <u>DEPT 30-2000107611</u> <u>PO BOX 9001036</u> <u>LOUISVILLE, KY 40290-1036</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>\$445.68</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.226	Nonpriority creditor's name and mailing address <u>WATER SCIENCE TECHNOLOGIES, LLC</u> <u>PO BOX 2207</u> <u>BIRMINGHAM, AL 35201</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$139,822.13</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Nonpriority creditor's name and mailing address <u>WATT & STEWART TRUCKING</u> <u>PO BOX 192</u> <u>SAN ANGLEO, TX 76902</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$23,625.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nonpriority creditor's name and mailing address <u>WEDEL RAHILL & ASSOCIATES, CPA'S, PLC</u> <u>PO BOX 16460</u> <u>OKLAHOMA CITY, OK 73113</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	Nonpriority creditor's name and mailing address <u>WFX ENERGY SERVICES, LLC</u> <u>PO BOX 270814</u> <u>OKLAHOMA CITY, OK 73137</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$862,736.93</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.230	Nonpriority creditor's name and mailing address <u>WILLIAMS SCOTSMAN, INC</u> <u>PO BOX 91975</u> <u>CHICAGO, IL 60693</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>\$1,603.24</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 2: Additional Page

3.231	Nonpriority creditor's name and mailing address <u>Wintrust Commercial Finance, a division of Wintrust Asset Finance, Inc.</u> <u>3201 Dallas Parkway, Suite 800</u> <u>TX</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>
3.232	Nonpriority creditor's name and mailing address <u>YORK TORC & TEST, LLC</u> <u>PO BOX 137</u> <u>GRAND CANE, LA 71032</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,620.00</u>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Abernathy Roeder Boyd Hullett c/o Paul Lopez 1700 N. Redbud Blvd., Suite 300 McKinney, TX 75069	Line <u>3.119</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.2	ALLEN BRYSON PLLC 211 N. CENTER ST. LOUISVILLE, KY 40232-3127	Line <u>3.103</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.3	BORMAN MYERCHING ESPESETH EDISON LLP 418 E BROADWAY AVENUE SUITE 240 DECATUR, AL 35601	Line <u>3.143</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.4	BRUCHEZ GOSS THORNTON MERONOFF BRIERS PC 4343 CARTER CREEK PARKWAY SUITE 100 HOUSTON, TX 77002-1055	Line <u>3.110</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.5	CAVIN & INGRAM P.A. 40 FIRST PLAZA CENTER NW SUITE 610 AUSTIN, TX 78701	Line <u>3.88</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.6	CISCO INC 4565 HERMAN SW SAN ANTONIO, TX 78216	Line <u>3.220</u> <input type="checkbox"/> Not listed. Explain _____	____ _
4.7	CLARK HILL 720 BRAZOS STREET SUITE 700 RICHARDSON, TX 75080	Line <u>3.88</u> <input type="checkbox"/> Not listed. Explain _____	____ _

Debtor Legend Energy Services, LLC
NameCase number (if known) 21-60451**Part 3:** Additional Page

4.8	CONNALLY LAW 922 ISOM ROAD SUITE 105 METAIRIE, LA 70006	Line <u>3.205</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.9	CST CO. PO BOX 33127 LONGVIEW, TX 75601	Line <u>3.37</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.10	CST CO. PO BOX 33127 LONGVIEW, TX 75601	Line <u>3.43</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.11	DORE ROTHBERG MCKAY 17171 PARK ROW SUITE 160 LONGVIEW, TX 75601	Line <u>3.116</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.12	DORE ROTHBERG MCKAY 17171 PARK ROW SUITE 160 LONGVIEW, TX 75601	Line <u>3.189</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.13	EPIC PERFORMANCE SOLUTIONS, LLC 5500 GREENWOOD PLAZA BLVD SUITE 225 GRAND RAPIDS, MI 49509	Line <u>3.22</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.14	INTERSTATE BILLING 2114 VETERANS DR SE HOUSTON, TX 77010	Line <u>3.122</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.15	INTERSTATE BILLING 2114 VETERANS DR SE HOUSTON, TX 77010	Line <u>3.179</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.16	JANET BURRESS PO BOX 33127 HOUSTON, TX 77063	Line <u>3.43</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.17	KIRKLIN, BRADLEY M. 815 WALKER STREET, SUITE 1440 HOUSTON, TX 77002	Line <u>3.42</u> <input type="checkbox"/> Not listed. Explain _____ _____

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 3: Additional Page

4.32	INTERSTATE BILLING 2114 VETERANS DR SE HOUSTON, TX 77010	Line <u>3.179</u> <input type="checkbox"/> Not listed. Explain _____
4.33	JANET BURRESS PO BOX 33127 HOUSTON, TX 77063	Line <u>3.43</u> <input type="checkbox"/> Not listed. Explain _____
4.34	KIRKLIN, BRADLEY M. 815 WALKER STREET, SUITE 1440 HOUSTON, TX 77002	Line <u>3.42</u> <input type="checkbox"/> Not listed. Explain _____
4.35	LAWSON & MURPHY Attn: David Price 2121 Spring Creek Pkwy Plano, TX 75023	Line <u>3.96</u> <input type="checkbox"/> Not listed. Explain _____
4.36	LYNCH CHAPPELL ALSUP PC c/o B BLUE HYATT, ATTORNEY 300 NORTH MARIENFELD SUITE 300 OKLAHOMA CITY, OK 73116	Line <u>3.14</u> <input type="checkbox"/> Not listed. Explain _____
4.37	LYNCH CHAPPELL ALSUP PC c/o B BLUE HYATT, ATTORNEY 300 NORTH MARIENFELD SUITE 300 OKLAHOMA CITY, OK 73116	Line <u>3.117</u> <input type="checkbox"/> Not listed. Explain _____
4.38	NCS COLLECTION SERVICES 729 MINER ROAD HOUSTON, TX 77084	Line <u>3.138</u> <input type="checkbox"/> Not listed. Explain _____
4.39	PENN CREDIT CORPORATION 2800 COMMERCE DR. LOUISVILLE, KY 40232-3127	Line <u>3.38</u> <input type="checkbox"/> Not listed. Explain _____
4.40	ROSS BANKS MAY CRON CAVIN PC 7700 SAN FELIPE SUITE 550 BRYAN, TX 77802	Line <u>3.201</u> <input type="checkbox"/> Not listed. Explain _____
4.41	The CASSEL LAW FIRM P.C. 204 N. FREDONIA STREET SPRING, TX 77379	Line <u>3.172</u> <input type="checkbox"/> Not listed. Explain _____

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 3: Additional Page

4.49	PENN CREDIT CORPORATION	Line <u>3.38</u>	
	2800 COMMERCE DR.		<input type="checkbox"/> Not listed. Explain _____
	LOUISVILLE, KY 40232-3127		
4.50	ROSS BANKS MAY CRON CAVIN PC	Line <u>3.201</u>	
	7700 SAN FELIPE		<input type="checkbox"/> Not listed. Explain _____
	SUITE 550		
	BRYAN, TX 77802		
4.51	The CASSEL LAW FIRM P.C.	Line <u>3.172</u>	
	204 N. FREDONIA STREET		<input type="checkbox"/> Not listed. Explain _____
	SPRING, TX 77379		
4.52	THE FUENTES FIRM PC	Line <u>3.73</u>	
	5507 LOUETTA ROAD		<input type="checkbox"/> Not listed. Explain _____
	SUITE A		
	MIDLAND, TX 79701		
4.53	THE JAMES FIRM	Line <u>3.178</u>	
	1316 5TH AVENUE		<input type="checkbox"/> Not listed. Explain _____
	CLEVELAND, OH 44143		
4.54	THE JAMES FIRM	Line <u>3.104</u>	
	1316 5TH AVENUE		<input type="checkbox"/> Not listed. Explain _____
	CLEVELAND, OH 44143		
4.55	THE LEVITON LAW FIRM	Line <u>3.206</u>	
	ONE PIERCE PLACE		<input type="checkbox"/> Not listed. Explain _____
	SUITE 725W		
	GREENWOOD VILLAGE, CO 80111		
4.56	THE RUDNICKI FIRM	Line <u>3.229</u>	
	7201 N. CLASSEN BLVD.		<input type="checkbox"/> Not listed. Explain _____
	SUITE 204		
	WACO, TX 76703-1669		
4.57	TUCKER ALBIN ASSOCIATES	Line <u>3.71</u>	
	1702 COLLINS BLVD		<input type="checkbox"/> Not listed. Explain _____
	SUITE 100		
	HARRISBURG, PA 17110		
4.58	VORY'S LLC	Line <u>3.223</u>	
	909 FANNIN STREET		<input type="checkbox"/> Not listed. Explain _____
	SUITE 2700		

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Part 3: Additional Page

4.59	<u>THE RUDNICKI FIRM</u> <u>7201 N. CLASSEN BLVD.</u> <u>SUITE 204</u> <u>WACO, TX 76703-1669</u>	Line <u>3.229</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.60	<u>TUCKER ALBIN ASSOCIATES</u> <u>1702 COLLINS BLVD</u> <u>SUITE 100</u> <u>HARRISBURG, PA 17110</u>	Line <u>3.71</u> <input type="checkbox"/> Not listed. Explain _____ _____
4.61	<u>VORY'S LLC</u> <u>909 FANNIN STREET</u> <u>SUITE 2700</u> <u>ALBUQUERQUE, NM 87201</u>	Line <u>3.223</u> <input type="checkbox"/> Not listed. Explain _____ _____

Debtor Legend Energy Services, LLC Case number (if known) 21-60451

Name

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	<u>\$0.00</u>
5b. Total claims from Part 2	5b. +	<u>\$10,907,057.46</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<u>\$10,907,057.46</u>

Fill in this information to identify the case:

Debtor name Legend Energy Services, LLC

United States Bankruptcy Court for the:
Eastern District of Texas

Case number (if known): 21-60451 Chapter 7

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>OKC OFFICE LEASE</p> <p>Contract to be ASSUMED</p> <p>State the term remaining</p> <p>16 months</p> <p>List the contract number of any government contract</p>	<p>PARAGON BUILDING ASSOCIATES</p> <p>5801 N. BROADWAY EXT</p> <p>Oklahoma City, OK 73118</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Andrews, TX Yard Lease</p> <p>Contract to be ASSUMED</p> <p>State the term remaining</p> <p>24 months</p> <p>List the contract number of any government contract</p>	<p>RIMROCK PROPERTIES, LLC</p> <p>3682 RIDGE DR</p> <p>GRAND JUNCTION, CO 81506</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Bowie, TX Yard Lease</p> <p>Contract to be ASSUMED</p> <p>State the term remaining</p> <p>3 months</p> <p>List the contract number of any government contract</p>	<p>BUCK LOCK/NZI PROPERTIES</p> <p>PO BOX 841</p> <p>BOWIE, TX 76230</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Corporate Copiers</p> <p>Contract to be ASSUMED</p> <p>State the term remaining</p> <p>5 months</p> <p>List the contract number of any government contract</p>	<p>SUMMITT BUSINESS SYSTEMS</p> <p>500 ENTERPRISE DR.</p> <p>EDMOND, OK 73013</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Longview Yard</p> <p>Contract to be ASSUMED</p> <p>State the term remaining</p> <p>14 months</p> <p>List the contract number of any government contract</p>	<p>BEJEWELLED, LLC</p> <p>1100 JUDSON RD., SUITE 400</p> <p>LONGVIEW, TX 75601</p>

Debtor Legend Energy Services, LLC
Name

Case number (if known) 21-60451

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.6	State what the contract or lease is for and the nature of the debtor's interest	<u>Longview Copier</u> <u>Contract to be ASSUMED</u>	<u>TEXAS DOCUMENT SOLUTIONS</u> <u>5533 S FM 2087</u> <u>LONGVIEW, TX 75603</u>
	State the term remaining	<u>11 months</u>	
	List the contract number of any government contract		
2.7	State what the contract or lease is for and the nature of the debtor's interest	<u>Andrews Copier</u> <u>Contract to be ASSUMED</u>	<u>ZENO OFFICE SOLUTIONS</u> <u>5301 W LOOP 250 N</u> <u>MIDLAND, TX 79707</u>
	State the term remaining	<u>4 months</u>	
	List the contract number of any government contract		
2.8	State what the contract or lease is for and the nature of the debtor's interest	<u>Credit Card Software</u>	<u>CONCUR</u> <u>601 108TH AVENUE NE., SUITE 1000</u> <u>BELLEVUE, WA 98004</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.9	State what the contract or lease is for and the nature of the debtor's interest	<u>Accounts payable processing software</u> <u>Contract to be ASSUMED</u>	<u>TRANSZAP, INC.</u> <u>633 17TH STREET, SUITE 2600</u> <u>DENVER, CO 80202</u>
	State the term remaining	<u>10 months</u>	
	List the contract number of any government contract		
2.10	State what the contract or lease is for and the nature of the debtor's interest	<u>Accounting software hosting</u>	<u>NEXTCORP</u> <u>7701 LAS COLINAS RIDGE, SUITE 100</u> <u>IRVING, TX 75063</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.11	State what the contract or lease is for and the nature of the debtor's interest	<u>Andrews TX Apt. Lease</u>	<u>RIMROCK PROPERTIES, LLC - APT</u> <u>160 W 2000</u> <u>Andrews, TX 79714</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.12	State what the contract or lease is for and the nature of the debtor's interest	<u>Houston officer</u>	<u>REGUS MANAGEMENT GROUP, LLC</u> <u>16225 Park Ten Place, Suite 513</u> <u>Houston, TX 77084</u>
	State the term remaining	<u>2 months</u>	
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name Legend Energy Services, LLC

United States Bankruptcy Court for the:

Eastern District of Texas

Case number (if known): 21-60451

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Legend Energy RE I, LLC

Street

LES CAPITAL, LLC

☐ D

☒ E/F

☐ G

City

State

ZIP Code

2.2 Legend Energy RE II, LLC

Street

CAVALIER ENERGY, LLC

☐ D

☒ E/F

☐ G

City

State

ZIP Code

LES CAPITAL, LLC

☐ D

☒ E/F

☐ G

2.3 Legend Energy RE III, LLC

Street

LES CAPITAL, LLC

☐ D

☒ E/F

☐ G

City

State

ZIP Code

2.4 Legend Energy RE IV, LLC

Street

LES CAPITAL, LLC

☐ D

☒ E/F

☐ G

City

State

ZIP Code

2.5 Legend Energy RE V, LLC

Street

LES CAPITAL, LLC

☐ D

☒ E/F

☐ G

City

State

ZIP Code

Debtor Legend Energy Services, LLC Case number (if known) 21-60451

Name

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing Address	Name	Check all schedules that apply:
2.6 <u>Legend Energy RE VI, LLC</u>	<div>Street</div> <div></div> <div>City State ZIP Code</div>	<u>LES CAPITAL, LLC</u>	<div><input type="checkbox"/> D</div> <div><input checked="" type="checkbox"/> E/F</div> <div><input type="checkbox"/> G</div>

Fill in this information to identify the case:

Debtor name Legend Energy Services, LLC

United States Bankruptcy Court for the:

Eastern District of Texas

Case number (if known): 21-60451 Chapter 7

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real Property:

Copy line 88 from *Schedule A/B*.....

\$0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*.....

\$1,029,573.59

1c. Total of all property:

Copy line 92 from *Schedule A/B*.....

\$1,029,573.59

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$0.00

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$10,907,057.46

4. Total liabilities.....

Lines 2 + 3a + 3b

\$10,907,057.46